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Bib Data Sheet

CONFIRMATION NO. 3292

|                             |                                       |              |                        |  |
|-----------------------------|---------------------------------------|--------------|------------------------|--|
| SERIAL NUMBER<br>10/807,207 | FILING DATE<br>03/22/2004<br><br>RULE | CLASS<br>455 | GROUP ART UNIT<br>2685 | ATTORNEY DOCKET NO.<br>022263-000310US |
|-----------------------------|---------------------------------------|--------------|------------------------|--|

APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*  
 This appln claims benefit of 60/458,621 03/31/2003  
 and claims benefit of 60/456,510 03/24/2003 *L.L. yes*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*  
*L.L. none*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*  
 \*\* 06/03/2004

|  |                           |                        |                       |                            |
|--|---------------------------|------------------------|-----------------------|----------------------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br>35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance<br>Verified and Acknowledged <i>Lana</i> Examiner's Signature Initials | STATE OR<br>COUNTRY<br>CA | SHEETS<br>DRAWING<br>7 | TOTAL<br>CLAIMS<br>17 | INDEPENDENT<br>CLAIMS<br>4 |
|--|---------------------------|------------------------|-----------------------|----------------------------|

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 94111-3834

TITLE  
 Direct conversion transmitter system and method with quadrature balancing and low LO feed through

|                                   |   |   |
|-----------------------------------|---|---|
| FILING FEE<br><br>RECEIVED<br>428 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
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